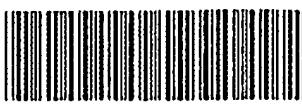


<b>Index of Claims</b> 				Application No.		Applicant(s)	
				09/994,839		LEE, JAE KYUNG	
				Examiner		Art Unit	
				Ting Zhou		2173	
<input checked="" type="checkbox"/> Rejected <input type="checkbox"/> Allowed		<input type="checkbox"/> (Through numeral) <input checked="" type="checkbox"/> Cancelled		<input type="checkbox"/> Non-Elected <input checked="" type="checkbox"/> Interference		<input type="checkbox"/> Appeal <input checked="" type="checkbox"/> Objected	
Claim	Date	Claim	Date	Claim	Date		
Final		Original		Final		Original	
1	7/27/84	Original		51		Original	
2	7/27/84	Original		52		Original	
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50	7/27/84	Original		100		Original	

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